

Rev. 5/98

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF U.S. V.S. Jermarie Anderson FOR AT LOCATION NUMBER

PERSON REPRESENTED (Show your full name) Jermarie Anderson

CHARGE/OFFENSE (describe if applicable & check box →)

Felony
 Misdemeanor

1 Defendant—Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other

DOCKET NUMBERS
 Magistrate
 District Court
104-10111-MEL-01
 Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed
	Name and address of employer: <u> </u>
	IF YES, how much do you earn per month? \$ <u> </u>
If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NO, give month and year of last employment
IF YES, how much does your Spouse earn per month? \$ <u> </u>	How much did you earn per month? \$ <u> </u>

ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	RECEIVED SOURCES

OTHER INCOME	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ <u> </u>
	<u> </u>

CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ <u> </u>
	<u> </u>

PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No
	VALUE DESCRIPTION

PROP- ERTY	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT <u> </u>
	<u> </u>

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them
	<input checked="" type="checkbox"/> SINGLE	<u> </u>	<u> </u>
	<input type="checkbox"/> MARRIED	<u> </u>	<u> </u>
	<input type="checkbox"/> WIDOWED	<u> </u>	<u> </u>
	<input type="checkbox"/> SEPARATED OR DIVORCED	<u> </u>	<u> </u>

OBLIGATIONS & DEBTS	APARTMENT OR HOME: <u>Brent</u>	Creditors	Total Debt	Monthly Paymt.
	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	<u> </u>	<u> </u>	\$ <u> </u>	\$ <u> </u>
	<u> </u>	<u> </u>	\$ <u> </u>	\$ <u> </u>
	<u> </u>	<u> </u>	\$ <u> </u>	\$ <u> </u>
	<u> </u>	<u> </u>	\$ <u> </u>	\$ <u> </u>
	<u> </u>	<u> </u>	<u> </u>	<u> </u>

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED) Jermarie Anderson